

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number 09-663543		Filing Date 8-5-04		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	/						51				
2		/					52				
3		/					53				
4		/					54				
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38	/						88				
39	/						89				
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41	/						91				
42	/						92				
43	/						93				
44	/						94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	19						Total Indep				
Total Depend	21						Total Depend				
Total Claims	40						Total Claims				